

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

Telephone Number

Name of Person Filing Rome Aloise	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any) Name Western Conf of Teamsters Pension TrustFund Trade Name, if any P O Box, Bldg, Room No, if any Street 2323 Eastlake Avenue E City Seattle State Washington ZIP Code + 4 98102	9 Business deals with <input checked="" type="checkbox"/> a Labor Organization <input type="checkbox"/> b Trust <input type="checkbox"/> c Employer
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name, if any P O Box, Bldg, Room No, if any Street City State ZIP Code + 4	11 a Nature of such dealing Multi-Employer Pension Trust Fund Trustee and Committee member 11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received See continuation page 12 b Amount \$4,835

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any) Name INVESCO Trade Name, if any P O Box, Bldg, Room No, if any Street 101 California Street, Suite 1900 City San Francisco State California ZIP Code + 4 94111	14 a Nature of payment. See Continuation page
13 b Is the Business an Employer <input checked="" type="checkbox"/> or Consultant <input type="checkbox"/> ?	14 b Amount of payment \$82

Name of Person Filing Rome Aloise

File Number U-

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name Teamsters Benefit Trust

Trade Name, if any

P O Box, Bldg, Room No, if any P O Box 5820

Street

City Fremont

State California ZIP Code + 4 94538

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

Multi-Employer Health Trust Fund

Trustee and Committee member

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

See continuation page

12 b Amount

\$812

Name of Person Filing Rome Aloise

File Number U-

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name Teamsters Life With Dues Trust Fund

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 552 Denny Way, Room 111

City Seattle

State Washington

ZIP Code + 4 98109

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State

ZIP Code + 4

11 a Nature of such dealing

Multi-Employer Benefit Trust Fund
Person in Item 3 Serves as Trustee

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

See continuation page

12 b Amount

\$67

Name of Person Filing Rome Aloise

File Number U-

Part C Continuation Page

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)

Name International Foundation of Employee Benefit

Trade Name, if any

P O Box, Bldg , Room No , if any P O Box 69

Street 18700 W Bluemound Road

City Brookfield

State Wisconsin ZIP Code + 4 53008-0069

14 a Nature of payment

See Continuation page

13 b Is the Business an Employer ☒ or Consultant ☐ ?

14 b Amount of payment

\$3,345

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)

Name

Trade Name, if any

P O Box, Bldg , Room No if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)

Name

Trade Name, if any

P O Box, Bldg , Room No , if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment

Name of Person Filing: Rome A. Aloise

Item 12.b;

**Continuation page for Western Conference of Teamsters Pension Trust,
page 2 of 5**

The person identified in Item 3 is a Union Trustee on the Board of Trustees of the entity identified in Item 10, which is a jointly administered pension trust fund under the Labor-Management Relations Act of 1947, as amended (the "Trust Fund"). In performance of his duties as a trustee on the Trust Fund, he has attended trustee meetings and met with representative(s) of the Trust Fund for the purpose of discussing trust fund-related matters. During the course of such meeting(s), the amount entered in Item 12 b represents the estimated value of food, beverages, lodging, and/or incidental expenses incurred by the Union Trustee's attendance of Board of Trustee quarterly meetings convened in January, April, July and October, and Trustee Committee meetings held quarterly in March, June, September, and December in connection with the performance of his duties as a Union Trustee.

Name of person filing: Rome A. Aloise

Item 14.a

Continuation page for INVESCO, Inc.

Page 2 of 5

In performance of his duties as a principal officer and business representative, the person identified in Item 3 transacts business related to representing the members of the bargaining units under collective bargaining agreements enforced by the labor organization listed in Item 4. The amount entered in Item 14.b is an estimate of the amount paid by the Employer identified in Item 13.a on his behalf for such value of food, beverages, and/or incidental expenses supplied to the person identified in Item 3. This estimate is based on a review of a business calendar for appointments and meetings in 2004.

Name of Person Filing: Rome A. Aloise;

Item 12.a

Continuation page for Teamsters Benefit Trust page 3 of 5

The person identified in Item 3 is a Union Trustee on the Board of Trustees of the entity identified in Item 8 that is a jointly administered health trust fund under the Labor-Management Relations Act of 1947, as amended (the "Trust Fund") In performance of his duties as a trustee on the Trust Fund, he has attended trustee meetings and met with representative(s) of the Trust Fund for the purpose of discussing trust fund-related matters During the course of such meeting(s), the amount entered in Item 12 b represents the estimated value of food, beverages, lodging, and/or incidental expenses incurred by the Union Trustee's attendance of quarterly meetings of the Board of Trustees The quarterly meetings referenced above occurred on or about February 6, 2004, May 7, 2004, August 6, 2004, and November 5, 2004

Name of Person Filing: Rome A. Aloise;

Item 12.a

Continuation page for Teamsters Life With Dues Trust page 4 of 5

The person identified in Item 3 is a Union Trustee on the Board of Trustees of the entity identified in Item 8 that is an administered trust fund under the Labor-Management Relations Act of 1947, as amended (the "Trust Fund"). In performance of his duties as a trustee on the Trust Fund, he has attended trustee meetings and met with representative(s) of the Trust Fund for the purpose of discussing trust fund-related matters. During the course of such meeting(s), the amount entered in Item 12 b represents the estimated value of food, beverages, and/or incidental expenses incurred by the Union Trustee's attendance of the meetings of the Board of Trustees. This estimate is based on a review of a business calendar for appointments and meetings for meetings in 2004.

Name of Person Filing: Rome A. Aloise;

Item No. 14.b

Continuation for International Foundation page 5 of 5

The person identified in Item 3 is a Committee member of the entity identified in Item 13 a which is an educational training program for Employee Benefit Plans. The amount entered in Item 14.b represents transportation, lodging, food, and/or incidental expenses incurred by the Union Committee Member in connection with his attendance and performance of his duties at the Employer's, as identified in Item 13 a, benefit educational programs and meetings which occurred in July and September, 2004.